

Compendium of Budget Information for the 2014 General Session

Social Services Appropriations Subcommittee

Agency: Health

Line Item: Medicaid and Health Financing

Function

The Division of Medicaid and Health Financing is the administrative agency for Utah's Medical Assistance Programs (Medicaid, Children's Health Insurance Program, Utah's Premium Partnership for Health Insurance, and Primary Care Network). As per federal requirements, all funding for Medicaid must flow through the Department of Health via a by a memorandum of understanding for all functions performed by other entities whether State, non-profit, for profit, local government, etc. About 83% of the medical services come from any willing provider who bills Medicaid directly. The other 17% of medical services come through two contracted health plans who handle the billing and case management services of their clients.

Federal regulations provide for a wide variety of funding ratios ranging from 50 to 90 percent for different classes of positions and functions for this Division. The Division includes the following seven offices or bureaus: Director's Office, Financial Services, Eligibility Policy, Coverage and Reimbursement, Medicaid Operations, Managed Health Care, and Authorization and Community Based Services. The Division also includes the following three budget programs: DWS Seeded Services, Other Seeded Services, and Contracts.

Federal law requires that the Medical Care Advisory Committee serve as an advisory board to the Division. This committee consists of providers, Medicaid recipients, representatives from the Department of Human Services and the Department of Workforce Services, and members of the community. The committee advises the Division on program content, policy, and priorities. The Committee is advisory and its decisions are not binding on the Division.

Medicaid Fraud Control Unit

The Medicaid Fraud Control Unit's mission is: "To protect the integrity of the Medicaid program and the safety and property of institutionalized citizens of the State of Utah through skilled detection, proactive investigation, prevention, prosecution and financial recovery." The Unit operates in the Attorney General's Office and focuses on criminal and civil actions against fraudulent providers and perpetrators of neglect and abuse against vulnerable adults in care facilities.

Statutory Authority

The Division of Medicaid and Health Financing is governed by several chapters of the Utah Health Code in Title 26 of the Utah Code.

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- UCA 26-18 establishes the Medical Assistance Program, commonly referred to as Medicaid and its administrative arm, the Division of Medicaid and Health Financing.
 - UCA 26-18-2.2 requires that the Medicaid director be appointed by the Governor with the consent of the Senate.
 - UCA 26-18-3 directs the Department of Health to enroll all Medicaid beneficiaries in the electronic exchange of clinical health records unless the individual opts out.
 - UCA 26-18-402 establishes the Medicaid Restricted Account from unexpended General Funds. The statute says that the Legislature might appropriate the money for expanding medical assistance coverage.
 - UCA 26-19 authorizes the Health Department to recover Medicaid benefits paid by the Division from third parties, including estates and trusts.
 - UCA 26-20 prohibits false Medicaid claims and establishes the Medicaid Fraud Control Unit.
 - UCA 26-35a creates the Nursing Care Facilities Account and levies an assessment on the owners of nursing care facilities to generate seed money which draws down additional federal funds for the reimbursement to those facilities.
 - UCA 26-47 requires the Department to create a Prescription Drug Assistance Program to assist individuals who need help in obtaining prescription drugs at a reduced cost or at no cost.
 - UCA 67-5-1 details the responsibilities of the Attorney General to investigate and prosecute abuse and neglect.

Intent Language

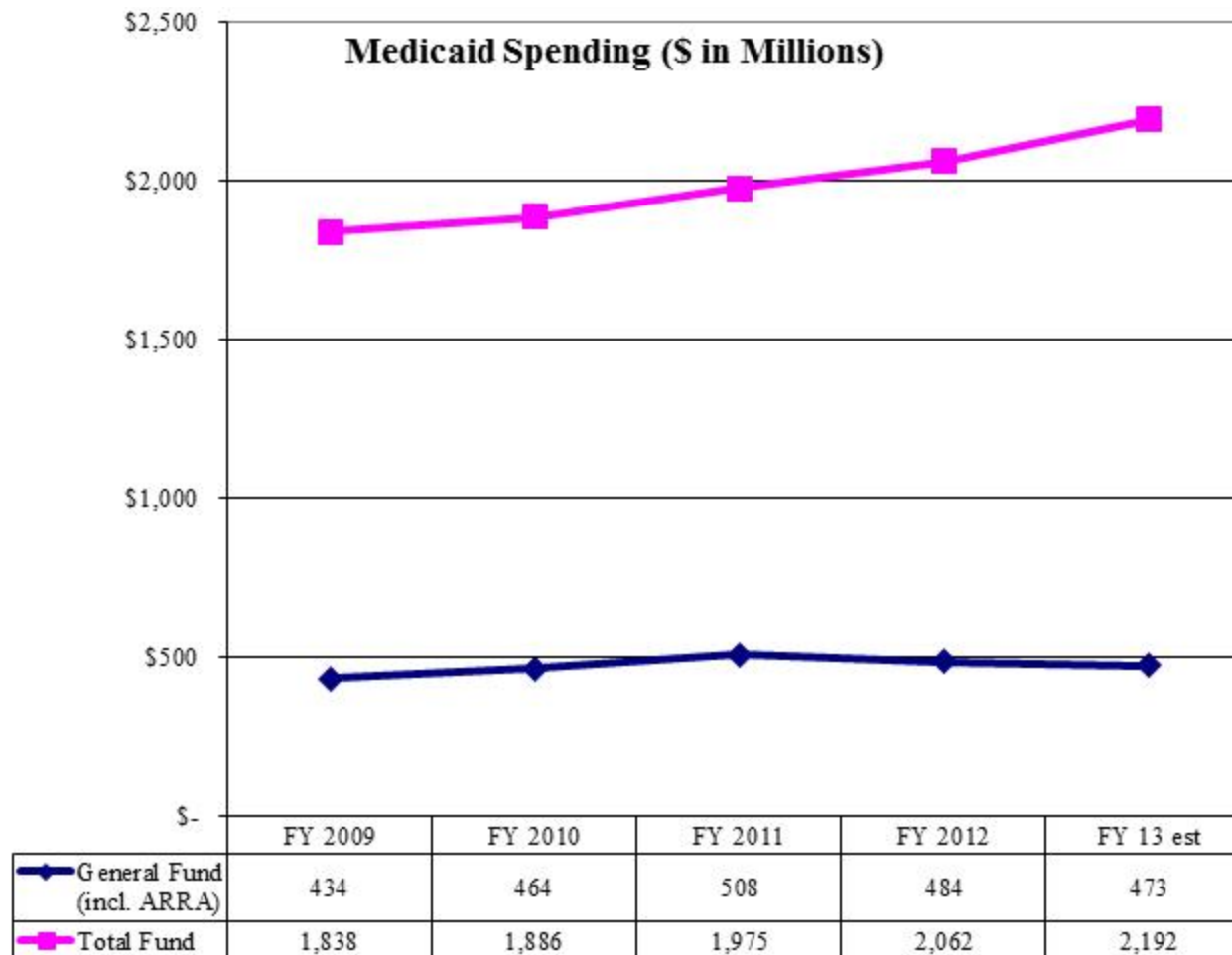
The Legislature intends that to the extent possible with existing appropriations, the Department of Health shall align Supplemental Nutrition Assistance Program regulations and Medicaid regulations.

The Legislature intends that the Department of Health provide its contractor's report on the costs and benefits of Medicaid optional expansion to the Office of the Legislative Fiscal Analyst as soon as it is ready. The Fiscal Analyst shall then distribute the report to all members of the Social Services Appropriations Subcommittee.

Under Section 63J-1-603 of the Utah Code the Legislature intends that appropriations provided for Health Care Financing in Item 6 of Chapter 14, Laws of Utah 2012 not lapse at the close of Fiscal Year 2013. The use of any nonlapsing funds is limited to \$50,000 for the purchase of computer equipment.

Under Section 63J-1-603 of the Utah Code the Legislature intends that appropriations provided for Health Care Financing in Item 6 of Chapter 14, Laws of Utah 2012 not lapse at the close of Fiscal Year 2013. The use of any nonlapsing funds is limited to \$425,000 for compliance with federally-mandated projects.

Performance



Related Links

Here is the Department of Health's annual report on Medicaid - http://health.utah.gov/medicaid/pdfs/annual_report2013.pdf.

Funding Detail

For analysis of current budget requests and discussion of issues related to this budget click [here](#).

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$4,645,200	\$4,774,600	\$0	\$4,774,600	\$69,700	\$4,844,300
General Fund, One-time	(\$271,100)	\$9,000	(\$645,300)	(\$636,300)	\$636,300	\$0
Federal Funds	\$55,255,100	\$55,212,300	\$17,952,400	\$73,164,700	(\$11,734,200)	\$61,430,500
American Recovery and Reinvestment Act	\$527,700	\$722,700	\$110,300	\$833,000	\$0	\$833,000
Dedicated Credits Revenue	\$8,288,600	\$7,421,700	\$562,700	\$7,984,400	\$0	\$7,984,400
GFR - Nursing Care Facilities Account	\$701,100	\$641,300	\$24,000	\$665,300	\$0	\$665,300
Transfers - Intergovernmental	\$0	\$0	\$0	\$0	\$0	\$0
Transfers - Medicaid - DHS	\$8,235,600	\$8,576,000	\$690,400	\$9,266,400	(\$55,500)	\$9,210,900
Transfers - Medicaid - DAS	\$0	\$0	\$1,065,100	\$1,065,100	\$0	\$1,065,100
Transfers - Medicaid - DWS	\$16,312,000	\$18,147,800	\$8,184,500	\$26,332,300	(\$2,500,000)	\$23,832,300
Transfers - Medicaid - JJS	\$0	\$41,900	(\$41,900)	\$0	\$0	\$0
Transfers - Medicaid - GOPB	\$1,065,100	\$1,307,500	(\$1,307,500)	\$0	\$0	\$0
Transfers - Medicaid - Internal DOH	\$2,778,900	\$193,500	\$3,053,800	\$3,247,300	\$0	\$3,247,300
Transfers - Medicaid - UDC	\$16,900	\$0	\$25,000	\$25,000	\$0	\$25,000
Transfers - Medicaid - USDB	\$27,200	\$0	\$27,400	\$27,400	\$800	\$28,200
Transfers - State Office of Rehabilitation	\$0	\$166,900	(\$166,900)	\$0	\$0	\$0
Transfers - Within Agency	\$1,060,600	\$5,064,300	(\$3,945,500)	\$1,118,800	\$400	\$1,119,200
Beginning Nonlapsing	\$693,500	\$0	\$475,000	\$475,000	(\$475,000)	\$0
Closing Nonlapsing	(\$475,000)	\$0	\$0	\$0	\$0	\$0
Lapsing Balance	(\$547,900)	\$0	\$0	\$0	\$0	\$0
Total	\$98,313,500	\$102,279,500	\$26,063,500	\$128,343,000	(\$14,057,500)	\$114,285,500

Programs	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Director's Office	\$1,827,300	\$1,738,300	\$397,600	\$2,135,900	(\$118,800)	\$2,017,100

Financial Services	\$13,530,600	\$11,411,300	\$2,445,100	\$13,856,400	(\$1,428,000)	\$12,428,400
Medicaid Operations	\$3,355,000	\$4,447,200	(\$1,480,600)	\$2,966,600	\$675,900	\$3,642,500
Managed Health Care	\$3,370,800	\$3,450,500	\$694,200	\$4,144,700	(\$274,200)	\$3,870,500
Authorization and Community Based Services	\$2,088,500	\$2,630,100	\$675,600	\$3,305,700	(\$314,800)	\$2,990,900
Contracts	\$1,136,500	\$1,845,200	(\$1,005,600)	\$839,600	\$363,700	\$1,203,300
Coverage and Reimbursement	\$2,122,500	\$2,638,300	\$417,000	\$3,055,300	(\$212,300)	\$2,843,000
Eligibility Policy	\$2,559,000	\$2,988,100	(\$758,900)	\$2,229,200	\$351,000	\$2,580,200
Department of Workforce Services' Seeded Services	\$35,855,300	\$36,295,600	\$24,553,500	\$60,849,100	(\$13,184,400)	\$47,664,700
Other Seeded Services	\$32,468,000	\$34,834,900	\$125,600	\$34,960,500	\$84,400	\$35,044,900
Program Integrity	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$98,313,500	\$102,279,500	\$26,063,500	\$128,343,000	(\$14,057,500)	\$114,285,500

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$15,034,100	\$16,522,300	\$1,301,100	\$17,823,400	\$26,500	\$17,849,900
In-state Travel	\$24,400	\$23,200	\$2,300	\$25,500	\$0	\$25,500
Out-of-state Travel	\$30,200	\$28,900	(\$7,800)	\$21,100	(\$500)	\$20,600
Current Expense	\$4,825,000	\$6,535,800	(\$2,262,500)	\$4,273,300	\$1,276,900	\$5,550,200
DP Current Expense	\$8,737,400	\$7,622,100	\$2,588,000	\$10,210,100	(\$2,260,400)	\$7,949,700
DP Capital Outlay	\$1,086,500	\$0	\$0	\$0	\$0	\$0
Capital Outlay	\$32,000	\$0	\$0	\$0	\$0	\$0
Other Charges/Pass Thru	\$68,543,900	\$71,547,200	\$24,442,400	\$95,989,600	(\$13,100,000)	\$82,889,600
Total	\$98,313,500	\$102,279,500	\$26,063,500	\$128,343,000	(\$14,057,500)	\$114,285,500

Other Indicators	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Budgeted FTE	210	203	15	217	0	217

Actual FTE	192	0	0	0	0	0
Vehicles	1	1	0	1	0	1

Program: Director's Office

Function

The Director's Office of the Division of Medicaid and Health Financing administers and coordinates Utah's Medicaid Program and Children's Health Insurance Program to comply with Titles XIX and XXI of the Social Security Act, other laws of the State, and the appropriated budget. The Governor appoints the Medicaid director with the consent of the Senate.

Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$344,400	\$882,300	(\$623,900)	\$258,400	\$205,000	\$463,400
General Fund, One-time	\$39,000	\$9,000	\$0	\$9,000	(\$9,000)	\$0
Federal Funds	\$866,400	\$838,500	\$237,600	\$1,076,100	(\$72,400)	\$1,003,700
Dedicated Credits Revenue	\$244,300	\$0	\$223,100	\$223,100	\$164,100	\$387,200
Transfers - Intergovernmental	\$0	\$0	\$0	\$0	\$0	\$0
Transfers - Medicaid - DHS	\$26,100	\$0	\$0	\$0	\$28,300	\$28,300
Transfers - Medicaid - DWS	\$0	\$0	\$0	\$0	\$0	\$0
Transfers - Medicaid - Internal DOH	\$0	\$8,500	(\$8,500)	\$0	\$0	\$0
Transfers - Medicaid - UDC	\$16,900	\$0	\$25,000	\$25,000	\$0	\$25,000
Transfers - Medicaid - USDB	\$0	\$0	\$27,400	\$27,400	(\$27,400)	\$0
Transfers - Within Agency	\$71,700	\$0	\$41,900	\$41,900	\$67,600	\$109,500
Beginning Nonlapsing	\$693,500	\$0	\$475,000	\$475,000	(\$475,000)	\$0
Closing Nonlapsing	(\$475,000)	\$0	\$0	\$0	\$0	\$0
Total	\$1,827,300	\$1,738,300	\$397,600	\$2,135,900	(\$118,800)	\$2,017,100

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$1,404,500	\$1,379,500	\$479,500	\$1,859,000	(\$136,200)	\$1,722,800
In-state Travel	\$700	\$600	(\$100)	\$500	\$0	\$500
Out-of-state Travel	\$6,300	\$6,000	\$100	\$6,100	(\$500)	\$5,600
Current Expense	\$310,400	\$204,500	(\$56,900)	\$147,600	\$17,900	\$165,500
DP Current Expense	\$25,600	\$68,200	(\$25,500)	\$42,700	\$0	\$42,700
DP Capital Outlay	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges/Pass Thru	\$79,800	\$79,500	\$500	\$80,000	\$0	\$80,000
Total	\$1,827,300	\$1,738,300	\$397,600	\$2,135,900	(\$118,800)	\$2,017,100

Other Indicators	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Budgeted FTE	28	12	3	15	0	15
Actual FTE	12	0	0	0	0	0
Vehicles	1	1	0	1	0	1

Program: Financial Services

Function

The Bureau of Financial Services is responsible for the following functions within the Division:

- Managing the administration and service budgets for Medicaid, Utah's Premium Partnership for Health Insurance, Primary Care Network programs, and the Children's Health Insurance Program.
- Monitoring, tracking, invoicing, and collecting drug rebates due from pharmaceutical manufacturers.
- Purchasing office equipment, computer hardware, and software for the Division.
- Managing contracts for the Division.

- Performing budget neutrality calculations on contracted health plans and comparing results to fee-for-service payments.
- Overseeing the collection of money from provider assessments.
- Performing Upper Payment Limit calculations for managed care plans.
- Preparing reports for the Centers for Medicare and Medicaid.
- Monitoring, tracking, invoicing, and collecting the Nursing Home and Hospital provider assessments.
- Projecting and forecasting the Medicaid budget.
- Monitoring, tracking, invoicing, and collecting seed revenue from other governmental entities.
- Preparing the Medicaid and Health Finance Annual Report.

Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$1,162,300	\$768,900	\$1,026,500	\$1,795,400	(\$86,500)	\$1,708,900
General Fund, One-time	\$87,200	\$0	(\$715,000)	(\$715,000)	\$715,000	\$0
Federal Funds	\$9,301,800	\$7,266,100	\$2,550,200	\$9,816,300	(\$1,886,500)	\$7,929,800
American Recovery and Reinvestment Act	\$527,700	\$722,700	\$110,300	\$833,000	\$0	\$833,000
Dedicated Credits Revenue	\$1,809,400	\$2,239,300	(\$741,800)	\$1,497,500	(\$140,800)	\$1,356,700
GFR - Nursing Care Facilities Account	\$0	\$0	\$0	\$0	\$0	\$0
Transfers - Medicaid - DHS	\$318,200	\$0	\$290,300	\$290,300	\$309,700	\$600,000
Transfers - Within Agency	\$324,000	\$414,300	(\$75,400)	\$338,900	(\$338,900)	\$0
Total	\$13,530,600	\$11,411,300	\$2,445,100	\$13,856,400	(\$1,428,000)	\$12,428,400

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$2,300,900	\$2,507,200	(\$317,200)	\$2,190,000	\$0	\$2,190,000
In-state Travel	\$800	\$200	\$600	\$800	\$0	\$800
Out-of-state Travel	\$8,400	\$8,000	(\$1,600)	\$6,400	\$0	\$6,400
Current Expense	\$1,712,700	\$1,596,800	\$260,600	\$1,857,400	\$832,400	\$2,689,800
DP Current Expense	\$8,337,700	\$7,299,100	\$2,502,700	\$9,801,800	(\$2,260,400)	\$7,541,400
DP Capital Outlay	\$1,086,500	\$0	\$0	\$0	\$0	\$0

Other Charges/Pass Thru	\$83,600	\$0	\$0	\$0	\$0	\$0
Total	\$13,530,600	\$11,411,300	\$2,445,100	\$13,856,400	(\$1,428,000)	\$12,428,400

Other Indicators	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Budgeted FTE	19	27	(3)	25	0	25
Actual FTE	27	0	0	0	0	0

Program: Medicaid Operations

Function

The Bureau of Medicaid Operations has the following five components:

- Customer Service - The Bureau staffs the Medicaid Information Line, providing online service to providers and clients regarding Medicaid eligibility, provider payment, and general information regarding all aspects of services provided by Medicaid. An automated call management system ensures that calls get routed to the correct area without having to go through numerous transfers. There is an automated phone system for providers to verify client eligibility.
- Utah Health Information Network (UHN) Involvement - UHN is a statewide cooperative of Medicaid, providers, and other third party payers. Its goal is to standardize health care information so that all claims data can go in an electronic transaction to participating payers.
- Medicaid Management Information System (MMIS) - Bureau staff identifies and approves updates and modifications to the MMIS to ensure the system is properly handling information on services provided by Medicaid. The staff also requests additional programming to implement policy changes and new federal/State regulations affecting claims processing. Staff is responsible for maintenance and data input of the MMIS subsystems, i.e. provider file, reference file, and security information.
- Claims Processing - The Bureau processes all claims received by Medicaid to ensure proper entry of information into the MMIS system and correct payment. The Bureau troubleshoots with providers in the event there are questions regarding payment or non-payment of claims, and coordinates repayment processes with other State and federal agencies. The majority of all claims are processed and paid electronically.
- Provider Enrollment -- The Bureau processes all applications of providers wishing to sign up for Medicaid reimbursement. Providers cannot sign up for Medicaid if they have current disciplinary action license restrictions, certain felonies, or misdemeanor conviction for a controlled substance. Additionally, a provider cannot have a current or prior problems involving sexual misconduct.
- Special Programs - The Bureau manages special programs under contract with Family Health and Preparedness (Prenatal program) and the Division of Child and Family Services (Custody Medical Care Program for foster care children). It also manages the Buy-out Program that ensures compliance with the third party liability requirements of the 1990 federal Omnibus Budget Reconciliation Act legislation. Additionally, the Bureau manages Utah Medicaid's required participation in the federally-funded Indian Health Services program.

Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$696,600	\$766,800	(\$256,500)	\$510,300	(\$22,300)	\$488,000
General Fund, One-time	(\$293,900)	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$2,374,900	\$3,202,300	(\$1,351,800)	\$1,850,500	\$717,100	\$2,567,600
Dedicated Credits Revenue	\$448,600	\$95,900	\$329,800	\$425,700	(\$11,300)	\$414,400
Transfers - Medicaid - DHS	\$78,900	\$0	\$83,800	\$83,800	(\$83,800)	\$0
Transfers - Within Agency	\$128,600	\$382,200	(\$285,900)	\$96,300	\$76,200	\$172,500
Lapsing Balance	(\$78,700)	\$0	\$0	\$0	\$0	\$0
Total	\$3,355,000	\$4,447,200	(\$1,480,600)	\$2,966,600	\$675,900	\$3,642,500

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$2,738,400	\$3,031,400	(\$673,700)	\$2,357,700	\$675,900	\$3,033,600
In-state Travel	\$5,700	\$5,900	(\$200)	\$5,700	\$0	\$5,700
Out-of-state Travel	\$1,500	\$2,300	(\$800)	\$1,500	\$0	\$1,500
Current Expense	\$405,700	\$1,354,200	(\$947,000)	\$407,200	\$0	\$407,200
DP Current Expense	\$197,300	\$53,400	\$141,100	\$194,500	\$0	\$194,500
Capital Outlay	\$6,400	\$0	\$0	\$0	\$0	\$0
Other Charges/Pass Thru	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$3,355,000	\$4,447,200	(\$1,480,600)	\$2,966,600	\$675,900	\$3,642,500

Other Indicators	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Budgeted FTE	54	52	3	55	0	55
Actual FTE	47	0	0	0	0	0

Program: Managed Health Care

Function

The Bureau of Managed Health Care is responsible for implementing and operating the managed care initiative that includes contracts with managed care plans to serve the medical and mental health needs of Medicaid clients. The Bureau is also responsible for the development and implementation of a home and community-based waiver program and the Child Health Evaluation and Care program that is Utah's version of the federally-mandated Early Periodic Screening, Diagnosis and Treatment Program covering prevention, outreach, and expanded services for enrolled children. The Bureau also operates the Restriction Program for Medicaid clients that use multiple sources of care for the same service. This program requires clients to limit their use of services to certain providers rather than using multiple providers for the same service.

Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$577,300	\$185,900	\$380,900	\$566,800	(\$48,600)	\$518,200
General Fund, One-time	(\$119,900)	\$0	(\$24,000)	(\$24,000)	\$24,000	\$0
Federal Funds	\$1,662,400	\$1,715,300	\$548,400	\$2,263,700	(\$221,300)	\$2,042,400
American Recovery and Reinvestment Act	\$0	\$0	\$0	\$0	\$0	\$0
Dedicated Credits Revenue	\$450,700	\$362,100	\$110,900	\$473,000	(\$20,100)	\$452,900
GFR - Nursing Care Facilities Account	\$701,100	\$641,300	\$24,000	\$665,300	\$0	\$665,300
Transfers - Medicaid - DHS	\$79,300	\$0	\$92,900	\$92,900	(\$92,900)	\$0
Transfers - Within Agency	\$89,100	\$545,900	(\$438,900)	\$107,000	\$84,700	\$191,700
Lapsing Balance	(\$69,200)	\$0	\$0	\$0	\$0	\$0
Total	\$3,370,800	\$3,450,500	\$694,200	\$4,144,700	(\$274,200)	\$3,870,500

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$2,509,200	\$2,695,700	\$484,900	\$3,180,600	(\$274,200)	\$2,906,400
In-state Travel	\$6,500	\$8,300	(\$100)	\$8,200	\$0	\$8,200

Out-of-state Travel	\$1,800	\$2,400	(\$1,200)	\$1,200	\$0	\$1,200
Current Expense	\$738,300	\$694,300	\$105,100	\$799,400	\$0	\$799,400
DP Current Expense	\$51,400	\$49,800	\$5,500	\$55,300	\$0	\$55,300
Capital Outlay	\$6,400	\$0	\$0	\$0	\$0	\$0
Other Charges/Pass Thru	\$57,200	\$0	\$100,000	\$100,000	\$0	\$100,000
Total	\$3,370,800	\$3,450,500	\$694,200	\$4,144,700	(\$274,200)	\$3,870,500

Other Indicators	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Budgeted FTE	43	33	3	36	0	36
Actual FTE	37	0	0	0	0	0

Program: Authorization and Community Based Services

Function

The Bureau of Authorization and Community Based Services serves as the administrative authority for the six Home and Community Based Waivers for the State. The Bureau directly administers the New Choices Waiver. The Bureau also oversees three Medicaid services: personal care, hospice services, and employment-related personal care services for individuals with disabilities working 40 hours or more per month. Additionally, the Bureau oversees the WorkAbility Program, which conducts outreach and education to support employment for people with disabilities. The Bureau is responsible for the prior authorizations required for some Medicaid services.

The Bureau determines Clinical Eligibility (commonly known as Level of Care) and programmatic eligibility. Staff from the individual programs makes these determinations. The Department of Workforce Services determines overall Medicaid eligibility.

Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$516,600	\$625,100	(\$171,100)	\$454,000	\$73,900	\$527,900

General Fund, One-time	\$0	\$0	\$93,700	\$93,700	(\$93,700)	\$0
Federal Funds	\$1,262,600	\$1,332,400	\$890,600	\$2,223,000	(\$286,100)	\$1,936,900
Dedicated Credits Revenue	\$279,300	\$254,700	\$30,400	\$285,100	(\$6,200)	\$278,900
Transfers - Medicaid - DHS	\$0	\$10,300	\$60,200	\$70,500	(\$70,500)	\$0
Transfers - Within Agency	\$131,000	\$407,600	(\$228,200)	\$179,400	\$67,800	\$247,200
Lapsing Balance	(\$101,000)	\$0	\$0	\$0	\$0	\$0
Total	\$2,088,500	\$2,630,100	\$675,600	\$3,305,700	(\$314,800)	\$2,990,900

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$2,038,900	\$2,215,400	\$1,031,300	\$3,246,700	(\$314,800)	\$2,931,900
In-state Travel	\$7,900	\$6,700	\$1,100	\$7,800	\$0	\$7,800
Out-of-state Travel	\$4,700	\$2,300	\$2,400	\$4,700	\$0	\$4,700
Current Expense	(\$9,900)	\$228,600	(\$210,000)	\$18,600	\$0	\$18,600
DP Current Expense	\$40,400	\$46,700	(\$18,800)	\$27,900	\$0	\$27,900
Capital Outlay	\$6,500	\$0	\$0	\$0	\$0	\$0
Other Charges/Pass Thru	\$0	\$130,400	(\$130,400)	\$0	\$0	\$0
Total	\$2,088,500	\$2,630,100	\$675,600	\$3,305,700	(\$314,800)	\$2,990,900

Other Indicators	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Budgeted FTE	25	28	5	33	0	33
Actual FTE	25	0	0	0	0	0

Program: Contracts

Function

This program deals with charges pertaining to the Attorney General contract and the mechanized claim processing system operation contracts.

Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$283,800	\$611,400	(\$385,600)	\$225,800	(\$9,900)	\$215,900
Federal Funds	\$577,100	\$975,600	(\$727,400)	\$248,200	\$384,900	\$633,100
Dedicated Credits Revenue	\$263,700	\$131,500	\$154,500	\$286,000	(\$8,000)	\$278,000
Transfers - Medicaid - DHS	\$0	\$0	\$0	\$0	\$0	\$0
Transfers - Medicaid - DWS	\$0	\$0	\$0	\$0	\$0	\$0
Transfers - Within Agency	\$67,400	\$126,700	(\$47,100)	\$79,600	(\$3,300)	\$76,300
Lapsing Balance	(\$55,500)	\$0	\$0	\$0	\$0	\$0
Total	\$1,136,500	\$1,845,200	(\$1,005,600)	\$839,600	\$363,700	\$1,203,300

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$0	\$0	\$0	\$0	\$0	\$0
Current Expense	\$1,136,500	\$1,638,400	(\$798,800)	\$839,600	\$363,700	\$1,203,300
Other Charges/Pass Thru	\$0	\$206,800	(\$206,800)	\$0	\$0	\$0
Total	\$1,136,500	\$1,845,200	(\$1,005,600)	\$839,600	\$363,700	\$1,203,300

Program: Coverage and Reimbursement**Function**

The Bureau of Coverage and Reimbursement Policy has the following four basic functions:

- Research, analyze, formulate, and make recommendations for medical policy modifications and to develop new policy.
- Research, analyze, formulate, and make recommendations for pharmacy program policy modifications and to develop new policy.
- Formulate and process all State Plan changes and administrative rules.
- Determine appropriate reimbursement rates and methodology reflecting State and federal mandates as well as budget allocations.
- Work with dental consultants.

Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$571,700	\$873,900	(\$393,600)	\$480,300	(\$20,900)	\$459,400
General Fund, One-time	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$1,245,600	\$1,584,300	\$424,600	\$2,008,900	(\$169,600)	\$1,839,300
Dedicated Credits Revenue	\$283,800	\$141,700	\$259,000	\$400,700	(\$16,900)	\$383,800
Transfers - Within Agency	\$133,200	\$38,400	\$127,000	\$165,400	(\$4,900)	\$160,500
Lapsing Balance	(\$111,800)	\$0	\$0	\$0	\$0	\$0
Total	\$2,122,500	\$2,638,300	\$417,000	\$3,055,300	(\$212,300)	\$2,843,000

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$1,958,600	\$2,477,300	\$423,100	\$2,900,400	(\$212,300)	\$2,688,100
In-state Travel	\$1,200	\$1,100	\$100	\$1,200	\$0	\$1,200
Out-of-state Travel	\$2,100	\$5,500	(\$4,300)	\$1,200	\$0	\$1,200
Current Expense	\$104,900	\$105,700	(\$4,300)	\$101,400	\$0	\$101,400
DP Current Expense	\$49,400	\$48,700	\$2,400	\$51,100	\$0	\$51,100
Capital Outlay	\$6,300	\$0	\$0	\$0	\$0	\$0
Total	\$2,122,500	\$2,638,300	\$417,000	\$3,055,300	(\$212,300)	\$2,843,000

Other Indicators	2013	2014	2014	2014	2015	2015
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	Actual	Approp	Change	Authorized	Change	Base
Budgeted FTE	18	22	1	23	0	23
Actual FTE	18	0	0	0	0	0

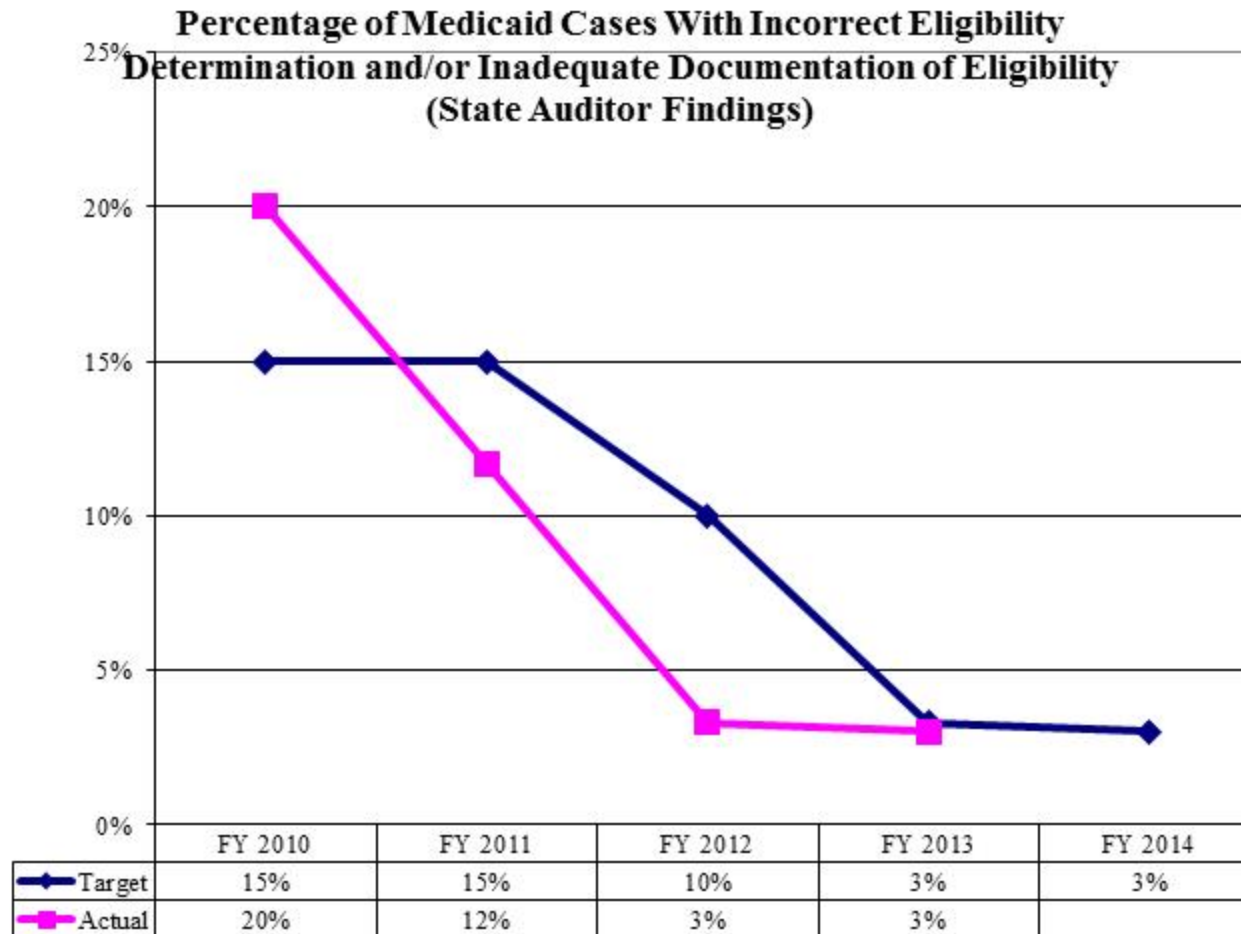
Program: Eligibility Policy

Function

The Bureau of Eligibility Policy is responsible to ensure Medicaid and Children's Health Insurance Program (CHIP) eligibility policy is in compliance with all State and federal statutes. It is also responsible to monitor the contract with the Department of Workforce Services to ensure timely and accurate Medicaid and CHIP eligibility determinations. The Department of Workforce Services determines the eligibility for nearly all clients to receive Medicaid services. The Department of Human Services contracts with the Department of Health to perform Medicaid eligibility. The Department of Human Services determines Medicaid eligibility for children in the custody of other states that reside in Utah, children in foster care, and for children receiving adoption assistance. Additionally, the Department of Human Services maintains Medicaid eligibility for children in the custody of Utah, but living in other states where they do not qualify for Medicaid.

The Bureau operates the Buyout Program which determines if purchasing private health insurance would save the Medicaid program money for high risk clients. If so, Medicaid pays the health premiums for that plan. The Bureau houses the Medicaid Eligibility Quality Control Unit responsible for reviewing and verifying the accuracy of all Medicaid eligibility determinations. Additionally, the Bureau includes the State's Medical Review Board which determines an individual's disability status in order to qualify for Medicaid.

Performance



Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$492,500	\$60,300	\$423,300	\$483,600	(\$21,000)	\$462,600

General Fund, One-time	\$16,500	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$1,038,800	\$1,303,800	(\$576,200)	\$727,600	\$337,900	\$1,065,500
Dedicated Credits Revenue	\$966,900	\$914,600	(\$63,200)	\$851,400	\$39,200	\$890,600
Transfers - Medicaid - DHS	\$28,300	\$0	\$56,300	\$56,300	(\$56,300)	\$0
Transfers - Medicaid - DWS	\$0	\$0	\$0	\$0	\$0	\$0
Transfers - Within Agency	\$115,600	\$709,400	(\$599,100)	\$110,300	\$51,200	\$161,500
Lapsing Balance	(\$99,600)	\$0	\$0	\$0	\$0	\$0
Total	\$2,559,000	\$2,988,100	(\$758,900)	\$2,229,200	\$351,000	\$2,580,200

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$2,083,600	\$2,215,800	(\$126,800)	\$2,089,000	\$288,100	\$2,377,100
In-state Travel	\$1,600	\$400	\$900	\$1,300	\$0	\$1,300
Out-of-state Travel	\$5,400	\$2,400	(\$2,400)	\$0	\$0	\$0
Current Expense	\$426,400	\$713,300	(\$611,200)	\$102,100	\$62,900	\$165,000
DP Current Expense	\$35,600	\$56,200	(\$19,400)	\$36,800	\$0	\$36,800
Capital Outlay	\$6,400	\$0	\$0	\$0	\$0	\$0
Other Charges/Pass Thru	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$2,559,000	\$2,988,100	(\$758,900)	\$2,229,200	\$351,000	\$2,580,200

Other Indicators	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Budgeted FTE	23	28	2	30	0	30
Actual FTE	26	0	0	0	0	0

Program: Department of Workforce Services' Seeded Services

Function

The Department of Workforce Services determines Medicaid eligibility. The funding in this program is the money that funds those efforts.

Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Federal Funds	\$19,543,300	\$18,147,800	\$16,369,000	\$34,516,800	(\$10,684,400)	\$23,832,400
Transfers - Medicaid - DWS	\$16,312,000	\$18,147,800	\$8,184,500	\$26,332,300	(\$2,500,000)	\$23,832,300
Total	\$35,855,300	\$36,295,600	\$24,553,500	\$60,849,100	(\$13,184,400)	\$47,664,700

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Other Charges/Pass Thru	\$35,855,300	\$36,295,600	\$24,553,500	\$60,849,100	(\$13,184,400)	\$47,664,700
Total	\$35,855,300	\$36,295,600	\$24,553,500	\$60,849,100	(\$13,184,400)	\$47,664,700

Program: Other Seeded Services

Function

Entities outside of the Department of Health contract with Medicaid, by sending some of their General Fund appropriations to the Division of Medicaid and Health Financing, which then uses those funds to draw down the matching federal Medicaid funds, then forwards all of the funds back to the original entities. This helps those entities leverage their funds by the federal match.

A few examples of seeded services from State agencies include:

- Office of Recovery Services to recover funds from health insurance companies covering Medicaid clients
- Division of Services for People with Disabilities to claim federal Medicaid dollars on the Physical Disabilities Waiver, the Community Supports Waiver, and the Brain Injury Waiver
- Division of Aging and Adult Services to claim federal Medicaid dollars on the Aging Waiver
- Division of Child and Family Services to claim federal Medicaid dollars to determine Medicaid eligibility on foster care children
- Department of Workforce Services to determine eligibility for Medicaid applicants

The Department of Health assesses an administrative fee to all entities for coordinating their funds with the Medicaid program. The Department of Health explains how the amount of the assessment is calculated with the following three scenarios based on total funds matched:

1. 3% of amounts less than \$500,000
2. \$15,000 and 2% of amounts above \$500,000 up to \$1,000,000
3. \$25,000 and 1% of amounts above \$1,000,000

A few examples of seeded services from non-State agencies include:

- University of Utah to provide Graduate Medical Education training
- Counties to provide mental health, substance abuse, as well as the Early Periodic Screening, Diagnosis and Treatment Program
- School districts to provide skill development services

Funding Detail

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$17,382,200	\$18,846,200	(\$412,600)	\$18,433,600	\$146,200	\$18,579,800
Dedicated Credits Revenue	\$3,541,900	\$3,281,900	\$260,000	\$3,541,900	\$0	\$3,541,900
Transfers - Intergovernmental	\$0	\$0	\$0	\$0	\$0	\$0
Transfers - Medicaid - DHS	\$7,704,800	\$8,565,700	\$106,900	\$8,672,600	(\$90,000)	\$8,582,600
Transfers - Medicaid - DAS	\$0	\$0	\$1,065,100	\$1,065,100	\$0	\$1,065,100
Transfers - Medicaid - JJS	\$0	\$41,900	(\$41,900)	\$0	\$0	\$0
Transfers - Medicaid - GOPB	\$1,065,100	\$1,307,500	(\$1,307,500)	\$0	\$0	\$0
Transfers - Medicaid - Internal DOH	\$2,778,900	\$185,000	\$3,062,300	\$3,247,300	\$0	\$3,247,300
Transfers - Medicaid - USDB	\$27,200	\$0	\$0	\$0	\$28,200	\$28,200
Transfers - State Office of Rehabilitation	\$0	\$166,900	(\$166,900)	\$0	\$0	\$0
Transfers - Within Agency	\$0	\$2,439,800	(\$2,439,800)	\$0	\$0	\$0
Lapsing Balance	(\$32,100)	\$0	\$0	\$0	\$0	\$0
Total	\$32,468,000	\$34,834,900	\$125,600	\$34,960,500	\$84,400	\$35,044,900

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Current Expense	\$0	\$0	\$0	\$0	\$0	\$0
Other Charges/Pass Thru	\$32,468,000	\$34,834,900	\$125,600	\$34,960,500	\$84,400	\$35,044,900
Total	\$32,468,000	\$34,834,900	\$125,600	\$34,960,500	\$84,400	\$35,044,900

Program: Program Integrity

Funding Detail

Effective FY 2011, this program is now in the Executive Director's Office line item.

Sources of Finance	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
General Fund	\$0	\$0	\$0	\$0	\$0	\$0
General Fund, One-time	\$0	\$0	\$0	\$0	\$0	\$0
Federal Funds	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$0	\$0	\$0	\$0	\$0	\$0

Categories of Expenditure	2013 Actual	2014 Approp	2014 Change	2014 Authorized	2015 Change	2015 Base
Personnel Services	\$0	\$0	\$0	\$0	\$0	\$0
In-state Travel	\$0	\$0	\$0	\$0	\$0	\$0
Current Expense	\$0	\$0	\$0	\$0	\$0	\$0
DP Current Expense	\$0	\$0	\$0	\$0	\$0	\$0
Total	\$0	\$0	\$0	\$0	\$0	\$0

Other Indicators	2013	2014	2014	2014	2015	2015
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	Actual	Approp	Change	Authorized	Change	Base
Budgeted FTE	0	0	0	0	0	0
Actual FTE	0	0	0	0	0	0

COBI contains unaudited data as presented to the Legislature by state agencies at the time of publication. For audited financial data see the State of Utah's Comprehensive Annual Financial Reports.